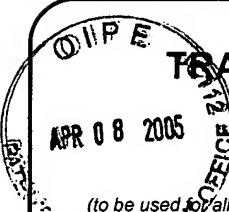
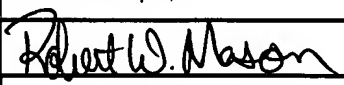


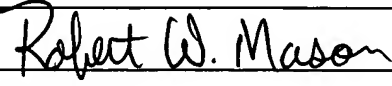
IFW

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 <p>TRANSMITTAL FORM</p> <p>(to be used for all correspondence after initial filing)</p>	Application Number	10/673,661
	Filing Date	September 29, 2003
	First Named Inventor	ERIKSSON, et al
	Art Unit	3761
	Examiner Name	N/A
Total Number of Pages in This Submission	Attorney Docket Number	CEL.728.US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Acknowledgement Postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Kinetic Concepts, Inc.		
Signature			
Printed name	Robert W. Mason,		
Date	6 April 2005	Reg. No.	42,848

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No. : 10/673,661 Confirmation No. 2357
Inventor : ERIKSSON, Elof et al.
Filed : September 29, 2003
Group Art Unit : 3761
Examiner : N/A
Attorney Docket No. : CEL.728.US
Customer No. : 30159
Title : SYSTEM AND METHOD FOR TRANSPLANTATION OF
DERMAL TISSUE

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

CERTIFICATE OF TRANSMISSION

37 C.F.R. § 1.8

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6 April 2005
Date

Cherie E. Ridout
Cherie E. Ridout

PRELIMINARY AMENDMENT

Dear Sir or Madam:

Prior to Examiner's initial examination, Applicant request entry of the following amendments. Applicant has submitted this amendment in order to place the application in better condition for allowance.

Amendments to the Specification begins on page 2 of this paper.

Summary begin on page 9 of this paper.